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AKCELI-1 CIP

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner

: Not yet assigned

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Group Art Unit

: 1645

NOV 2 9 2001

Applicant(s)

: David Sabatini

TECH CENTER 1600,2000

Application No.

: 09/817,003

Confirmation No.: 5682

Filed

: March 22, 2001

For

: ARRAYED TRANSFECTION METHOD AND USES

RELATED THERETO

Hon. Commissioner for Patents

New York, New York November 21, 2001

Washington, D.C. 20231

### TRANSMITTAL LETTER

sir:

Transmitted herewith: [X] Revocation of Power of Attorney and Power of Attorney; [] a Preliminary Amendment; [] a Reply to Office Action; [] a Supplemental Amendment; [] a substitute Specification; [] a Declaration; [] a Supplemental Declaration; [] a Power of Attorney; [] an Associate Power of Attorney; [] formal drawings; to be filed in the above-identified patent application.

### FEE FOR ADDITIONAL CLAIMS

- [X] A fee for additional claims is not required.
- [ ] A fee for additional claims is required.

The additional fee has been calculated as shown below:

| R<br>A  | LAIMS<br>EMAINING<br>FTER<br>MENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE    | ADDITIONAL<br>FEES |
|---|---------------------------------------|---|------------------|---------|--------------------|
| TOTAL CLAIM   | ıs -                                  | *   | =                | x \$ 9  | 9 = \$             |
| INDEPENDENT   | ]                                     | - **  | =                | x \$ 42 | 2 = \$             |
| FIRST PRESENTATION OF A  MULTIPLE DEPENDENT CLAIM + \$140 = \$        |                                       |   |                  |         | 0 = \$             |
| <pre>* If less than 20, insert 20. ** If less than 3, insert 3.</pre> |                                       |   |                  | TOTAL   | <u>\$</u>          |

- [ ] A check in the amount of \$\_\_\_\_ in payment of the filing fee is transmitted herewith.
- [X] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.
- [] Please charge \$\_\_\_\_\_ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

#### EXTENSION FEE

[] The following extension is applicable to the Response filed herewith; [] \$55.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); [] \$200.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); [] \$460.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); [] \$720.00 extension fee for response within fourth month pursuant to 37 C.F.R.

§ 1.136 (a); [] \$980.00 extension fee for response within fifth month pursuant to 37 C.F.R. 1.136(a).

- [] A check in the amount of [] \$55.00; [] \$200.00; [] \$460.00; [] \$720.00; [] \$980.00; in payment of the extension fee is transmitted herewith.
- [X] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.
- [] Please charge the [] \$55.00; [] \$200.00; [] \$460.00; [] \$720.00; [] \$980.00; extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

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Thereby Certify that this Correspondence is being Deposited with the U.S. Postal Selvice as First Class Hail in an Envelope Addressed to: ASSISTANT CONTISSIONER FOR PATRICE.
WASHINGTON, D.C. 20231 on

n Signing



AKCELI-1 CIP #5

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Group

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TECH CENTER 1600/2900

Applicants

David Sabatini

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Hon. Commissioner for Patents Washington, D.C. 20231

# REVOCATION OF POWER OF ATTORNEY AND POWER OF ATTORNEY

Sir:

WHITEHEAD INSTITUTE FOR BIOMEDICAL RESEARCH, the

assignee of the entire right, title and interest in and to the above-identified United States application, hereby revokes all previous powers of attorney and appoints the following attorneys/agents to transact all business in the United States Patent and Trademark Office in connection therewith:

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WHITEHEAD INSTITUTE FOR BIOMEDICAL RESEARCH

Ву:

Patricia Granahan

Intellectual Property Manager

Date: November 20, 2001